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| POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 09403392 |
| | Filing Date | 2001-10-21 |
| | First Named Inventor | Austin, Rupert |
| | Title | NOVEL COMPOUNDS |
| | Art Unit | 1624 |
| | Examiner Name | Truong, Tamthom Ngo |
| | Attorney Docket Number | A2019-1 US/NS |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

| Practitioner(s) Name | Registration Number |
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|--|--|-------|-------------------------|-----|-------|
| <input type="checkbox"/> Firm or Individual Name | AstraZeneca Pharmaceuticals LP | | | | |
| Address | Global Intellectual Property 35 Gatehouse Drive | | | | |
| City | Waltham | State | MA | Zip | 02451 |
| Country | US | | | | |
| Telephone | 781-839-4736 | Email | Patents@AstraZeneca.com | | |

I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on September 23, 2011.

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|--|-----------|--------------|
| Signature | /John X. Haberman/ | Date | 2011-09-23 |
| Name | John X. Haberman | Telephone | 781-839-4736 |
| Title and Company | Senior Patent Director, Infection; AstraZeneca Pharmaceuticals | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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